



NACCHO

National Aboriginal Community Controlled Health Organisation

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FAQs FOR ABORIGINAL COMMUNITY CONTROLLED HEALTH SERVICES 2011

This program is funded by the Commonwealth Government Department of Health and Ageing as part of the Fifth Community Pharmacy Agreement.

What is QUMAX?

QUMAX stands for 'Quality Use of Medicines Maximised for Aboriginal and Torres Strait Islander Peoples'. The QUMAX Program is the result of an initiative developed jointly by the Department of Health and Aging (DoHA), Pharmacy Guild of Australia (the Guild) and the National Aboriginal Community Controlled Health Organisation (NACCHO). The program now operates in 71 Aboriginal Community Controlled Health Services (ACCHS) in non-remote areas of Australia.

What is Quality Use of Medicines (QUM)?

QUM can have different meanings for different people:

- For an individual, it may mean using medicines appropriately, safely and effectively and having the knowledge and tools to do so.
- For health professionals, it is choosing the most appropriate and cost effective treatment and giving people the knowledge and skills to use medicines to their best effect.
- For providers of health services and products, it means contributing to best practice through appropriate information, education and responsible promotional activities.
- For governments, it means developing public policy, health systems, regulation and education that support best medicines use.
- For the media, it means reporting issues around use of medicines accurately and responsibly.

What does the QUMAX Program aim to achieve?

The QUMAX Program aims to improve the health outcomes of Aboriginal and Torres Strait Islander peoples who attend participating Aboriginal Community Controlled Health Services (ACCHSs) in rural, regional and urban areas of Australia. The focus of the Program is improved medication compliance and quality use of medicines (QUM). QUMAX complements the s 100 program in remote and very remote areas.

Role of Community Pharmacy

The role of the community pharmacy will be enhanced under the Program to provide patient focussed and culturally appropriate services for ACCHSs and their clients.

Is my Service eligible to participate in the Program?

ACCHSs that are funded by the Commonwealth Government (Office for Aboriginal and Torres Strait Islander Health) to provide primary health care services and that employ GP(s) are eligible to participate in the Program if they meet the following criteria:

- a.) the ACCHS is in a RRMA classification (1991 Census Edition) of 1-5 (i.e. a non-remote location)
See http://www.healthworkforce.com.au/main_rrma.asp
- b.) the ACCHS is not currently eligible to participate in the remote Section 100 arrangements for supply of pharmaceutical benefits; and
- c) The ACCHS agrees to adhere to the [Program Specific Guidelines](#) and the annual QUM Work plan.

What will my Service do under the QUMAX Program?

Your Service will develop a QUM work plan to implement strategies and policies that improve:

- a.) quality prescribing and timely dispensing of PBS medicines; and
- b.) compliance with prescribed medicines by clients of your Service through:
 - improving transport arrangements for medicines and prescriptions between your service and local community pharmacies; and
 - reducing barriers to accessing PBS medicines and Dose Administration Aids.

How will the QUM Work Plan be developed?

The NACCHO QUMAX Program Manager will provide your Service with a login to the NACCHO online QUM Work Plan site which can easily be completed to make up your Service's Work Plan. You will also be provided with the contact details for a QUM Support Pharmacist (QUMSP) and the relevant NACCHO State Affiliate. Your Service can be assisted by these support staff to complete your QUM Work Plan. It is expected that your Service will involve relevant ACCHS staff (including participating doctors, Aboriginal Health Workers (AHWs) and public health officers) in filling out the Work Plan.

The 2011/ 2012 Work Plan is divided into seven sections:

1. DAA arrangements
2. QUM pharmacy support
3. HMR models of support
4. QUM devices
5. QUM education
6. Cultural awareness
7. Transport

How long will the QUM work plan run for?

The QUM work plan is in effect for one year.

What must my Service do to get started?

Step 1: Registration

To participate, ACCHS are required to complete an annual registration form. The registration form requires authorisation by the ACCHS Chief Executive Officer (CEO). ACCHS will be advised of the annual registration period and registration will only be accepted during this time. The ACCHS registration form is available from the QUMAX Module on the NACCHO Communication Network (NCN):

http://ncn.naccho.org.au/ncn/ncn_admin.pl For information regarding login to the NCN go to <http://www.naccho.org.au/Files/Documents/NCN-FAQsNov2010.pdf> or contact the QUMAX Manager at NACCHO on (02) 6248 0644.

You will also be provided with the contact details of your QUM Support Pharmacist and State Affiliate contact once you have registered in the Program.

Step 2: QUM Work Plan Development

Once the Registration process is complete, the NACCHO QUMAX Program Manager will notify you of your Service's overall annual budget for participation in the Program. You will then complete the on line QUM Work Plan. Your assigned QUM Support Pharmacist and a State Affiliate contact (or other NACCHO proxy if your relevant Affiliate is unable to participate) can assist you complete the Work Plan.

The completed QUM Work Plan will be submitted online by your CEO through the NCN. All QUM Work Plans should ideally be received by the end of June each year.

Step 3: QUM Work Plan Approval

Each submitted QUM Work Plan is assessed by NACCHO and the Pharmacy Guild QUMAX Program Managers and recommendations are forwarded to the DoHA for final approval. It is not unusual that some amendments may be needed to the Work Plan during this approval process.

Step 4: Letter of Offer

Once the QUM Work Plan has been approved, your Service will be provided with a Letter of Offer (including Terms and Conditions) by the Guild for participation in the Program. The Letter of Offer will include your Service's annual budget allocation, the approved QUM Work Plan and the conditions of participation in the QUMAX program.

Step 5 Implement the QUM Work Plan.

Step 6: Monitoring and bi-annual Review

NACCHO and the Pharmacy Guild QUMAX Program Managers will monitor the QUM Work Plan. On a six monthly basis, your Service will be asked to complete a short on-line report on progress on those aspects of the QUM Work Plan that are funded.

How will my Budget be determined?

Your Service will be provided with a budget allocation as part of its Funding Agreement (Letter of Offer) with the Guild. See the Program Specific Guidelines on the NCN for details.

The budget will be based on the number of QUMAX clients accessing your Service in a 12-month period compared with the total number of clients of each eligible participating ACCHS.

You can allocate funding in your Budget dependent upon your services' priorities to any or all of the seven categories in the Work Plan and in line with your capped annual budget. The objectives / activities for each of the QUM support categories are significant in reflecting needs of the local community and informing the ACCHS for further planning.

What will ACCHS doctors do under the Program?

During each consultation the doctor will determine whether a patient requires assistance under the Program in accordance with the Service's policies and the QUMAX Program Specific Guidelines. The process for ordering Dose Administration Aids will be decided by the individual ACCHS.

How will the patient receive their medicines?

The patient will take their prescription to a participating community pharmacy and the medicine will be dispensed by the pharmacist as usual. In some instances your Service or the pharmacy may provide transport assistance for urgent supply of medicines to needy patients.

What type of assistance is available to patients?

The QUMAX Work Plan includes seven QUM categories (as referred to above) with the aim of improving the health outcomes for Aboriginal and / or Torres Strait Islander peoples:

1. Dose Administration Aid (DAA) arrangements

Aim: Reduce the financial barriers to access a comprehensive DAA service provided by community pharmacies to improve medication compliance and medication management for ACCHS clients.

2. QUM pharmacy support

Aim: To facilitate additional community pharmacy involvement and support in areas such as QUM planning, policies, protocol development, medicine quality assurance and appropriate Safety Net utilisation to provide greater accessibility to Aboriginal and Torres Strait Islander patients.

3. Home Medicines Review (HMR) models of support

Aim: Reduce the cultural and logistical barriers to access HMRs by ACCHS clients.

4. QUM devices

Aim: Reduce the financial barriers of access to QUM devices to improve overall delivery of medicines and management of chronic diseases i.e. asthma and diabetes.

5. QUM education

Aim: Reduce financial barriers of access to QUM education and health promotion for ACCHS employees and their clients. This category may also help ACCHS to access current medicine resources, promoting suitable, safe and effective medication management for ACCHS clients

6. Cultural awareness

Aim: Improve access and delivery of cultural awareness resources and training for the community pharmacy to promote a culturally aware pharmacy environment.

7. Transport

Aim: Reduce barriers of access to medicines and community pharmacy services by providing transport support. The Work Plan categories enable ACCHS to develop local QUM objectives and negotiate with preferred community pharmacy (or pharmacies) to establish bulk local QUMAX DAA Agreements and any other support as requested.

Patient benefits include;

- Improved health outcomes
- Improved medication adherence
- Reduced risk of adverse drug events and hospitalisation due to medicine misuse
- Increased access to pharmacy and pharmacists and better cultural awareness in community pharmacies
- Increased patients' understanding and self management of their own conditions
- An increase in the regularity and quality of contact between ACCHSs and their clients.
- Increased patient access to HMRs.
- Increased patient access to the PBS.

Will all patients be eligible for assistance?

The QUMAX Program is intended to benefit all Aboriginal and Torres Strait Islander people of any age who present to participating ACCHS and are assessed by prescribers to be at risk of adverse health outcomes from a failure to comply with their medicine regime without assistance. The decision regarding eligibility is made by the doctor at each consultation.

How will the information I provide at registration be used?

The information provided at registration and in QUM Work Plans is kept securely but ACCHSs can view their own data at any time via the internet at www.naccho.org.au . The information provided in the registration form:

1. is used in the calculation of the budget for your service;
2. provides information about your service which can be accessed by your designated staff, your designated QUM Pharmacist, your State Affiliate contact (or proxy), and the NACCHO and Pharmacy Guild QUMAX Program Managers so that they can assist in the development of the QUM Work Plans;
3. provides base-line information by which you can gauge progress under the Program (e.g. increases in accessing PIP, changes in uptake of education); and
4. Provides information regarding existing relationships with pharmacies so that they can be encouraged to participate in the Program.

How will the information provided in my QUM Work Plan be used?

The information recorded in your Service's QUM Work Plan defines the activities that your Service and your QUM Support Pharmacist will undertake under the Program. It also represents what priority and what budget your Service allocates to the various QUM activities.

This information will be available to you, your QUM Support Pharmacist, your State Affiliate contact, NACCHO, the Guild, and the DoHA to assist in meeting the Program objectives, to monitor progress and to monitor Program expenditure.

Confidential Privacy Provisions

Patient identifiable data is only available within the relevant ACCHS. De-identified patient data and prescribed data will be available to the DoHA, NACCHO and the Guild for the purpose of carrying out their duties under the Program.

What reporting is required?

Participating ACCHSs will be required to provide the Guild and NACCHO with six monthly feedback reports, including progress and financial reporting against QUM Support categories as outlined on the approved QUMAX Work Plan. A reporting mechanism for ACCHSs is available through the NCN and will involve the ACCHS specifying the following for each QUM support category:

- the amount spent versus allocated budget;
- how the funding was spent (i.e. what was purchased); and
- the number of patients that have benefited.

What are Dose Administration Aids (DAAs)?

DAAs are well-sealed, tamper-evident devices that allow individual medicine doses to be organised according to the prescribed dose schedule. A DAA service assists in the safe and effective administration of a consumer's medication and improved adherence. It is for this reason that QUMAX has identified DAA arrangements as a major component of the implementation of the Program. For optimal use of DAAs professional support services are provided in a more holistic way.

What QUM devices have been identified as appropriate to be funded under QUMAX 2011 / 2012? (Section 4 of the Work Plan);

- Asthma spacer
- Child mask
- Nebuliser
- Glucometer Kit
- Lancets for glucometer; and
- BP monitor for patient regular home use (such as a digital BP monitor).

If you are unsure about other devices that may be appropriate to be funded under QUMAX contact the QUMAX manager on (02) 6248 0644 or email; qumaxmanager@naccho.org.au

What is a Home Medicine's Review (HMR) and how can it benefit ACCHS clients?

In the 2011/2012 QUMAX round, ACCHS's can allocate funds to implement local enhancements to models of HMRs to better meet ACCHS clients and Services needs.

HMRs may be recommended for clients on care plans and those who continue to be non-compliant with medications despite a DAA being in place.

A HMR consists of a free home visit by a pharmacist (although it can occur elsewhere at the choice of the client) to discuss the use of prescribed medicines, over-the-counter and complementary medicines, storage of medicines and identify any potential side effects or significant drug interactions. Health issues relating to the medicines prescribed are also discussed as well as lifestyle changes. The pharmacist then provides a written and often verbal report to the referring doctor and a medication management plan is developed in consultation with the client.

What will community pharmacies do under the QUMAX Program?

Participating community pharmacies will provide more patient focused and culturally appropriate services for ACCHSs and their clients. Community pharmacies that participate in the Program will:

- provide Dose Administration Aids to ACCHS designated clients;
- assist with streamlined transport arrangements for medicines and prescriptions;
- assist with enrolments in other programs relating to diabetes, asthma and Home Medicines Reviews.
- may agree to facilitate additional involvement and support in areas such as QUM planning, policies, protocol development, medicine quality assurance and appropriate Safety Net utilisation as defined in each ACCHS's Work Plan.

What will QUM Support Pharmacists do under the QUMAX Program?

QUM Support Pharmacists (QUMSPs) will work with each ACCHS and local participating pharmacies to:

- contact your ACCHS to provide advice and support to assist with strengthening the relationship between ACCHS and the community pharmacy.
- assist in the development of QUMAX Work Plan objectives and QUMAX DAA Agreements between ACCHS and community pharmacies;
- provide QUM education to ACCHS staff; and
- help develop strategies to maximize;
 - ACCHS access to QUM education, PIP and SIP prescriber incentives;
 - access to Home Medicine Reviews;
 - enrolment in relevant diabetes and asthma programs schemes and registers; and
 - recording of PBS Safety Net entitlements for ACCHS families by participating pharmacies;
 - formal GMBH training.

How often will I see my QUM Support Pharmacist?

Your QUM Support Pharmacist will dedicate 10 days per year to your Service. At least 2 to 3 of those days will be spent visiting your Service to assist with QUM Work Plan development and to provide QUM training. The remaining time will be spent assisting with documenting QUM Work Plan activities and working with local participating community pharmacies. Services may contact their QUM Support Pharmacist at any time during work hours to ask questions about the Program.

How will the State Affiliates assist my Service in the QUMAX Program?

The State Affiliate will work with the QUM Support Pharmacist in assisting your Service. In conjunction with NACCHO, they can:

- Provide information to QUMAX Pharmacists regarding working within the ACCHS sector in the relevant jurisdiction.
- Communicate with QUMPS and NACCHO regarding state based priorities and issues;
- Provide advice in the development of key policies to facilitate the introduction of the QUMAX Program in your Service; and
- Review your QUM Work Plan to ensure QUM opportunities are maximized at a state level (Affiliates will be provided with online access to each relevant ACCHS registration form and QUM Work Plan to minimize administration tasks).

What is the role of NACCHO in the Program?

NACCHO will assist the Guild as a key partner in managing the Program. Activities will include:

- providing coordination, management and support to ACCHSs and State Affiliates;
- developing and providing information on the Program to ACCHSs and State Affiliates;

- developing and hosting the online registration and QUM work plan development processes on its web site;
- providing advice to QUM Support Pharmacists regarding their engagement with ACCHSs and State Affiliates; and
- providing advice to the Guild and the DoHA on appropriate protocols relating to the use of ACCHS data, the program performance as a whole, and progress advice;
- Providing advice to the Department of Health and Ageing on related programs and issues, and ensuring the longevity of the program;
- Ensuring the NACCHO Board of Directors is aware of the activity of ACCHSs in this program.

What is the role of the Pharmacy Guild in the Program?

The Pharmacy Guild is funded by the Commonwealth under the Fifth Community Pharmacy Agreement to develop and manage the Program. It will do this in partnership with NACCHO.

Is the QUMAX Program here to stay?

The QUMAX Program started in 2008 and is funded under the Fifth Community Pharmacy Agreement through to June 2015. The Program has been highly valued and praised by all stakeholders and NACCHO will continue to advocate for the continuation of this program beyond 2015. The PBS co-pay relief measure was derived from QUMAX and is funded through 2013-14 under the COAG 'Close the Gap' initiative.

Who should I contact if I need further information?

NACCHO QUMAX Program Manager, at qumaxmanager@naccho.org.au
or telephone (02) 6248 0644.

The Pharmacy Guild QUMAX Program Manager, at qumax@guild.org.au

QUMAX hotline on 1300 764 088.
